

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACC-2 AMENDMENT TO WELL HISTORY

API NO. 15- 129-20933-00-00

Operator: License # 5447
Name OXY USA Inc.
Address P. O. Box 26100
Oklahoma City, OK 73126-0100
City/State/Zip _____

County Morton
Approx: _____ East
NW/4 SE/4 NE/4 Sec 8 Twp 34 Rge 42 West

3738 Ft North from Southeast Corner of Section
943 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser _____

Lease Name Interstate E Well # 2

Operator Contact Person Raymond Hui
Phone (405) 749-2471

Field Name North Taloga

Name of New Formation Morrow

Designate Type of Original Completion
 New Well Re-Entry Workover

 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

Elevation: Ground 3430 KB 3441'
Section Plat

Date of Original Completion: 12-7-1988

DATE OF RECOMPLETION:
1-10-89 4-10-1989
Commenced, Completed

RECEIVED
STATE CORPORATION COMMISSION
4-13-1989
APR 13 1989

										5280
										4950
										4620
										4290
										3960
										3630
										3300
										2970
										2640
										2310
										1980
										1650
										1320
										990
										660
										330

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion

Plug Back Re-perforation
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)?

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Time-log Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

.....
.....
4-13-89

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACC-4 prior to or with this form for approval of commingling or dual completions. Submit CP-4 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Bryan O. Humphries Title Engineering Manager Date 4-10-1989

Subscribed and sworn to before me this 10th day of April 19 89

Notary Public Marsha B. Wilson Date Commission Expires 4-1-92

SIDE TWO

Operator Name OXY USA Inc. Lease Name Interstate E Well # 2

Sec 8 Twp 34 Rge 42 East West County Morton

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name	Top	Bottom
Morrow	4242'	4252'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<input checked="" type="checkbox"/> Perforate	4242	4252	3868'	---	---
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
4	Morrow 4242-4252'	1000 gal 7-1/2% HCL acid.

PBTD 4356' Plug Type 4400'

TUBING RECORD:

Size 2-3/8" Set At 4276' Packer At --- Was Liner Run? Y N

Date of Resumed Production, Disposal or Injection ---

Estimated Production Per 24 Hours --- bbl/oil --- bbl/water
632 MCF gas --- gas-oil ratio